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Total Number of Pages in This Submission

Application Number	10/074,524
Filing Date	February 11, 2002
First Named Inventor	Emken, Jeremy
Art Unit	3736
Examiner Name	MARMOR II, Charles Alan
Attorney Docket Number	PA873

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <input type="checkbox"/> Return Postcard
<input type="checkbox"/> Remarks		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Medtronic Vascular, Inc.		
Signature			
Printed name	James F. Crittenden		
Date	November 29, 2004	Reg. No.	39,560

### CERTIFICATE OF TRANSMISSION/MAILING

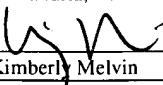
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Signature	
Typed or printed name	Kimberly Melvin
Date	November 29, 2004

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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By:	
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln. No. : 10/074,524 Confirmation No.: 6764  
Applicant : EMKIN, Jeremy *et al.*  
Filed : February 11, 2002  
TC/A.U. : 3736  
Examiner : MARMOR II, Charles Alan  
  
Docket No. : P873 US  
Customer No. : 28390  
Title : CENTERING BRACHYTHERAPY CATHETER

Mail Stop AMENDMENT  
Commissioner for Patents  
P.O. Box 1450  
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**AMENDMENT AND REPLY UNDER 37 C.F.R. 1.111**

Sir:

In response to the Office Action mailed September 7, 2004, please amend the above-identified application as set forth below.

**Amendments to the Specification** begin on page 2 of this paper.

**Amendments to the Claims** are reflected in the listing of claims, which begins on page 4 of this paper.

**Remarks** begin on page 8 of this paper.